FEC FORM 3X

Office

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REPORT OF RECEIPTS AND DISBURSEMENTS

2011 JUL 19 PM 12: 1-0-

FEC FORM 3X

Rev. 12/2004

For Other Than An Authorized Committee Office Use Only TYPE OR PRINT ▼ NAME OF Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. na sa i dentina estima PAMIERICAN ASSIDCIATION OF CLINICAL ENDOCRINOLOGISTS INC. DAC-AACED AC ADDRESS (number and street) Check if different than previously 32202 reported. (ACC) JACK SION VILLE FL CITY A STATE A ZIP CODE FEC IDENTIFICATION NUMBER ▼ NEW 3. IS THIS **AMENDED** 0 036386 REPORT ..(N) (A) TYPE OF REPORT (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) Report (Non-Election Year Only) (Chcose, One) The second of the second Due On: Sep 20 (M9) Dec 20 (M12) Mar 20 (M3) Jun 20 (M6) (Non-Electio Year Only) (a) Quarterly Reparts: 2 11:00 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) E AN April 15 Quarterly Report (Q1) (c) 12-Day Primary (12P) General (12G) Rurroff (12R) July 15 de leasand a **PRE-Election** Quarterly Report (Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report (Q3) FM M / FD / D in the January 31 Election on State of Year-End Report (YE) July 31 Mid-Year 30-Day (d) Report (Non-election **POST-Election** General (30G) Runoff (30R) Special (30S) Year Only) (MY) Report for the: Termination Report ' D D in the (TER) Election on State of Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. LONALD TREASURER Type or Print Name of Treasurer A Robert 1.15 0 0 7 TREASURE Date Signature of Treasurer 3. Char all color

NOTE: Submission of false, arroneous, of incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

AMERICAN ASSOCIATION OF CLINICAL ENDOCRINDLOGISTS, INC-AACEPAC

Report Covering the Period:

From:

012011

0630 2011

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2 0 1 1		7,70245
	(b) Cash on Hand at Beginning of Reporting Period	7,702,45	
	(c) Total Receipts (from Line 19)	[
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1 4,55, 2.45	in of the forest of extended the forest of t
7.	Total Disbursements (from Line 31)	0.00	
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	. 14,55245	y i grangan gana ja agampan ganagan gan agan agamp ganagan ganagan
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	go anganagawangarengaan garangeras pronquantya angan mga ang () () () () () () () () () () () () () () () () (
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	The section of the se	

For further information contact:

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 809-424-9530 Local 202-694-1100

FE6AN026

DETAILED SUMMARY PAGE

of Receipts FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

American Association of Clinical Endocrinologists, Inc. - AACEPAC

01 01 2011 06 30 2011 Report Covering the Period: From: To:

I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date					
11.	Contributions (other than loans) From: (a) Individuals/Persons Other							
	Than Political Committees (i) Itemized (use Schedule A)	3,5,0,0,00	3, 5, 0, 0.00					
	(ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii)▶	3,3 5 0.00 6 8 5 0.00	3 3 5 0.00 6 8 5 0.00					
	(b) Political Party Committees							
12.	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) Transfers From Affiliated/Other	6,8,50.00	6,850.00					
	Party Committees							
-	All Loans Received							
	Loan Repayments Received Offsets To Operating Expenditures (Refunds, Rebates, etc.)	L. P. L. C. Amilio (National or Total)	Land of Cambridge Lands (Table)					
16.	(Carry Totals to Line 37, page 5)	A A A A A A A A A A A A A A A A A A A						
4	to Federal Candidates and Other Political Committees	The second secon	part, same age organization grange and a superior					
	Other Federal Receipts (Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds		partition of the angular grant partition of the state of					
	(a) Non-Federal Account (from Schedule H3)							
	(b) Levin Funds (from Schedule H5)							
	(c) Total Transfers (add 18(a) and 18(b))							
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	6,850,00	6,850.00					
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	6,8,5,0.00	6,8.5.0.00					

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Patiod	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:	- IJW IIIJ I WIOU	Calendar rear-to-Date
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)	passagating to a gammagara agammaga ang ana passagara aga maga	para i si singga paga paga pagamangaan indi ng mga baas
(i) Federal Share		
(i) Toostal Offato	Marine On markening and commentation of the control	in the color of the state of th
(ii) Non-Federal Share	week to the result of the second of the second to the second of the seco	
(b) Other Federal Operating		್ಲಿ ಬಿ. ಬಿ. ಬಿ. ಬಿ. ಬಿ. ಬಿ. ಬಿ. ಬಿ. ಬಿ. ಬಿ
Expenditures	handbooker Production Day 100 100 100	in the first of the state of th
(c) Total Operating Expenditures	المستاك والمستكرين المستاك والمستاك والمستكرين والمستكر	And the second of the second o
(add 21(a)(i), (a)(ii), and (b))▶		Constitute Thereties when the little first in the con-
22. Transfers to Affiliated/Other Party	The second control of the second control of the second of	्रा हुँ । देश राष्ट्र क्षिप्रताम रक्षाकारण का श्रीप्रकारण विशेषात्री । १८५० स्था ।
Committeee23. Contributions to		The state of the s
Federal Candidates/Committees		A septiment of the Character of the septimental forms of the afficient
and Other Political Committees		
24. Independent Expenditures		The state of the s
(use Schedule E)25. Coordinated Party Expenditures		tendente (h. 18. alimber) de la
(2 U.S.C. §441a(d)) (use Schedule F)		
(400 00100410 1)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:	ا المراجع المر المراجع المراجع	ing and the afternoon of the grant of the gr
(a) Individuals/Persons Other Than Political Committees		
	From the control of t	and formula in the section of the se
(b) Political Party Committees		
(c) Other Political Committees		
(such as PACs)		'! !!
	Control On the Charles Front of Touri	
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))	· Daile Daile Daile Daile	- from the Darker And Darkon to a five
	See the second of the second o	The Committee of the Co
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20)))	
(a) Allocated Federal Election Activity		
(from Schedule H6)		- All American Consideration Denomination (2) of the All American Consideration (3) of the All American (3) of t
(i) Federal Share		ika ni Tuan kini. Philippa shiring Deneklari iku i Talinin shirin
(ii) III aviall Chara	المستور	
(ii) "Levin" Share	<u> </u>	
(b) Federal Election Activity Paid Entirely With Federal Funds	المستوات بالمركب المستوات الم	
		Company of the Compan
• • • • • • • • • • • • • • • • • • • •		Annual or Annual grad man the author antices of the and man
Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	had been been been been been been been bee	Continue Con
31. Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0.00	0.00
	Continued to the transfer of t	0.00
32. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	0.00	0.00
	. U.UU !.	المرابع في المرابع المستخدم المستخدم المرابع المرابع المرابع المرابع المرابع المرابع المرابع المرابع

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	6 8 5 0.00	6 8 5 0.00
34. Total Contribution Refunds	processing the processing memperature of the second	
(from Line 28(d))	Language of the state of the state of	and the first their material transfer and the state of th
35. Net Contributions (other than loans)		6 8 5 0.00
(subtract Line 34 from Line 33)	6,850.00	
36. Total Federal Operating Expenditures	The state of the s	
(add Line 21(a)(i) and Line 21(b))▶		ing of the second secon
37. Offsets to Operating Expenditures	the section of second and the section of the sectio	and the state of t
(fram Line 15, page 3)	er the Co. Oh. Franks Obselver for The	in the Court of the Manager of the State of
38. Net Operating Expenditures	The second section of the second seco	
(subtract Line 37 from Line 36)		Na critica di trans a di seria de la critica de la crit ica di seria di seria di seria di seria di seria di seria

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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-	13	14	15	П	16	17

	Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and a		
NAME OF COMMITTEE (In Full) American Association of Clinic	cal Endocrinologia	sts, Inc AACEPAC
Full Name (Last, First, Middle Initial) A. Leddy, Anne L.		Date of Receipt
Mailing Address 704 Thimble Shoals Blvd., Suite	e 300A	04 14 2011
City State Newport News VA	Zip Code 23606-4544	Amount of Each Receipt this Period
FEC ID number of contributing		2.5 0.00
Name of Employer Tidewater Physicians Multispecialty Group	Physician	
	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) B. Hamilton, Carlos, R., Jr.		Date of Receipt
Mailing Address 7000 Fannin Street, Suite 1535 City State	Zip Code	02 02 2011
Houston TX	77030	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		2 5 0.00
Name of Employer University of Texas Health Science Center	Physician	
Primary Conoral	Year-to-Date ▼ 250 . 00	
Full Name (Last, First, Middle Initial) C. Bergman, Donald A.		Date of Receipt
Mailing Address 1199 Park Avenue, Suite 1F City State	Zip Code	02 19 2011
New York NY	10128-1713	Amount of Each Receipt this Period
federal political committee.		2 5 0.00
Mt. Sinai Sch. Med. Occupation Mt. Sinai Sch. Med. Physic		
Primary General Other (specify)	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		7 5 0.00
TOTAL This Period (last page this line number only)		

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

FOR LINE NUMBER: PAGE 2 OF 1 Use separate schedule(s)

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
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NAME OF COMMITTEE (In Full) American Association of Cli	nical Endocrinologia	sts, Inc AACEPAC
Full Name (Last, First, Middle Initial) A. Orzeck, Eric, A.		Date of Receipt
Mailing Address 10023 S Main Street C4		03 14 2011
City Stat Houston T	te Zip Code X 77025	Amount of Each Receipt this Period
federal political committee.		2.5.0.00
Diabetes Resource Center Phy	oatlon /sician	
	egate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) B. Caldarella, Felice, A.	Date of Receipt	
Mailing Address 9100 Wescott Drive, Suite 10 City State	te Zip Code	06 22 / 2011
Flemington NJ		Amount of Each Receipt this Period
federal political committee.		2,5,0,00
	ysician	
Primary General Other (specify)	egate Year-to-Date ▼ 250, 00	T : : : : : : : : : : : : : : : : : : :
Full Name (Last, First, Middle Initial) C. Grunberger, George		Date of Receipt
Mailing Address	e 208	
City Stat Bloomfield Hills MJ	te Zip Code	Paristra in Combined Seathwrite in J
FEC ID number of contributing federal political committee.	48302-5054	Amount of Each Receipt this Period 2 5 0.00
Name of Employer Occup Grunberger Diabetes Institute	Physician	
Primary Ganeral	egate Year-to-Date ▼ 250.00	
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SCHEDULE A	(FEC	Form	3X)
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NAME OF COMMITTEE (In Full)		y pro					J. 10				
American Association of	of Clinic	al Endocrinologis	its	, Ind	c.		- Ai	ACEP	AC		
Full Name (Last; First, Middle Initial) A. Leffert, Jonathan, D.			T	Date of Receipt							
Mailing Address North Texas I 9301 N. Central Expres	ssway, Su	ite 570		02		7	•) / [- 'v '	77 2	0 1 1	Υ]
City Dallas	State TX	Zip Code 75231-4412	1	a. · .:	· .						
FEC ID number of contributing federal political committee.				Amount		;	10,00		 	:- ``	00
Name of Employer North Texas Endocrine	Name of Employer North Texas Endocrine Center Physician										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00									
Full Name (Last, First, Middle Initial) B. Johnson, Marina				Date of	Re	ıcei	eipt				
Mailing Address IPEM 433 E. Las Colinas Blv				04			•] / [* <u>*</u>	201	l 1	Y
City Irving	State TX	Zip Code 75039	_	Amoura	~*	F	ach D	lCoint A	nie "	Perio-	-10
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Name of Employer I PEM	Occupation		\dashv								
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Primary General Other (specify) ▼	00 0	Year-to-Date ▼ 250.00									
Full Name (Last, First, Middle Initial) C. Lal, Padma			1	Date of	Re	же	eipt				
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1000 East Genesse St.			_	03	:		28		2,01	11	
City Syracuse	State NY	Zip Code 13210-1683	\bot	Amount	of	Ea	ach Re	ceipt th	nis F	eriod	
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Name of Employer Bascik Kohn and Lal MI	Occupation Ds Phys:	ician	-								
Receipt For:	I II y S	Year-to-Date ▼	\dashv								
Primary General Other (spacify) ▼	55 5	250.00									
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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		13		14		15	_	16		717
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Any information copied from such Reports and Statements or for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full) American Association of Clin Full Name (Last, First, Middle Initial) A. Fink, Raymond, I. Mailing Address 8851 Center Drive, Suite 404 City State La Mesa CA	1 address of any political committee	to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) American Association of Clin Full Name (Last, First, Middle Initial) A. Fink, Raymond, I. Mailing Address 8851 Center Drive, Suite 404 City State		sts, Inc AACEPAC						
American Association of Clin Full Name (Last, First, Middle Initial) A. Fink, Raymond, I. Mailing Address 8851 Center Drive, Suite 404 City State	ical Endocrinologis							
A. Fink, Raymond, I. Mailing Address 8851 Center Drive, Suite 404 City State		Date of Receipt						
8851 Center Drive, Suite 404 City State								
	<u> </u>	Amount of Each Receipt this Period						
	Zip Code 91942-3063							
federal political committee.		2 5 0.00						
Name of Employer Diabetes & Endocrine Associates Physi								
	te Year-to-Date ▼ 250.00							
Full Name (Last, First, Middle Initial) B. Haas, Richard, A.		Date of Receipt						
Mailing Address 200 Lincoln St.		0 6 1 0 2 0 1 1						
City State Worcester MA	Zip Code 01605-2528	Amount of Each Receipt this Period						
federal political committee.		2 5 0.00						
Name of Employer UMass Memorial Medical Center Physi								
Primary General Other (specify) ▼	tte Year-to-Date ▼ 250.00							
Full Name (Last, First, Middle Initial) C. Berkson, Richard, A.	Full Name (Last, First, Middle Initial) Berkson, Richard, A.							
Mailing Address 1868 Pacific Avenue City State	1868 Pacific Avenue							
Long Beach CA9	0806-6113	Amount of Each Receipt this Period						
federal political committee.)	5 0 0.00						
Pro Health Partners Physics	ton sician							
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